


Fill in this information to identify the case:

Debtor 1 Marvin D. Williams, Jr.

Debtor 2 \_\_\_\_\_  
(Spouse, if filing)

United States Bankruptcy Court for the: Eastern and Western District of Arkansas 

Case number 6:22-bk-70868

## Official Form 410S2

**Notice of Postpetition Mortgage Fees, Expenses, and Charges** 12/15

If the debtor's plan provides for payment of postpetition contractual installments on your claim secured by a security interest in the debtor's principal residence, you must use this form to give notice of any fees, expenses, and charges incurred after the bankruptcy filing that you assert are recoverable against the debtor or against the debtor's principal residence.

File this form as a supplement to your proof of claim. See Bankruptcy Rule 3002.1.

Name of creditor: Simmons Bank

Court claim no. (if known): 16

Last 4 digits of any number you use to identify the debtor's account: 7 6 1 7

Does this notice supplement a prior notice of postpetition fees, expenses, and charges?

☒ No

☐ Yes. Date of the last notice: \_\_\_\_\_

**Part 1: Itemize Postpetition Fees, Expenses, and Charges**

Itemize the fees, expenses, and charges incurred on the debtor's mortgage account after the petition was filed. Do not include any escrow account disbursements or any amounts previously itemized in a notice filed in this case or ruled on by the bankruptcy court.

Description	Dates incurred	Amount
1. Late charges	_____	(1) \$ _____
2. Non-sufficient funds (NSF) fees	_____	(2) \$ _____
3. Attorney fees	_____	(3) \$ _____
4. Filing fees and court costs	_____	(4) \$ _____
5. Bankruptcy/Proof of claim fees	_____	(5) \$ _____
6. Appraisal/Broker's price opinion fees	_____	(6) \$ _____
7. Property inspection fees	_____	(7) \$ _____
8. Tax advances (non-escrow)	_____	(8) \$ _____
9. Insurance advances (non-escrow)	<u>02/15/2024</u>	(9) \$ <u>2,683.12</u>
10. Property preservation expenses. Specify: _____	_____	(10) \$ _____
11. Other. Specify: _____	_____	(11) \$ _____
12. Other. Specify: _____	_____	(12) \$ _____
13. Other. Specify: _____	_____	(13) \$ _____
14. Other. Specify: _____	_____	(14) \$ _____

The debtor or trustee may challenge whether the fees, expenses, and charges you listed are required to be paid. See 11 U.S.C. § 1322(b)(5) and Bankruptcy Rule 3002.1.

Debtor 1 Marvin D. Williams, Jr.  
First Name Middle Name Last Name

Case number (if known) 6:22-bk-70868

**Part 2: Sign Here**

The person completing this Notice must sign it. Sign and print your name and your title, if any, and state your address and telephone number.

*Check the appropriate box.*

☐ I am the creditor.

☒ I am the creditor's authorized agent.

**I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.**

X/s/ Jacob P. Fair  
Signature

Date 03/06/24

Print: Jacob P. Fair  
First Name Middle Name Last Name

Title SVP & Assistant General Counsel

Company Simmons Bank

Address Post Office Box 8010  
Number Street  
Little Rock AR 72201  
City State ZIP Code

Contact phone (501)217-4823

Email jacob.fair@simmonsbar

**NOTICE OF HAZARD INSURANCE****Great American Insurance Group**

Program Administrator: OVERBY-SEAWELL COMPANY  
 Administrative Office: 3550 George Busbee Pkwy STE 300  
 Kennesaw, GA 30144  
 ISSUE DATE: 02/13/24  
 Phone: 833-739-5822  
 Fax: 866-735-7156

**THIS INSURANCE IS NON-TRANSFERABLE****ITEM 1: Borrower Name and Mailing Address**

Marvin D Williams JR  
 Bankruptcy  
 C/O Simmons Bank Attn Mary Ellen Moore  
 PO Box 733  
 Union City TN 38261

**Insured Mortgagee Name and Address**

Simmons Bank  
 PO Box 9067  
 Pine Bluff, AR 71611-9067  
  
 8580001

**ITEM 2: Coverage Period**

Effective Date			Expiration Date			Term in Months
MO	DA	YR	MO	DA	YR	
02	10	24	02	10	25	
						12

**Notice Number: OSC559934****Master Policy Number: 1250291-OSC****Loan Number: 7617****ITEM 3:**

COVERAGE TYPE	MARK ONE	AMOUNT OF INSURANCE	PREMIUM
RESIDENTIAL (1-4 Family Dwelling)			
MULTIFAMILY (5+ Family Building)			
COMMERCIAL OCCUPIED (Building)			
COMMERCIAL VACANT (Building)			
MOBILE HOME (Anchored)	<b>X</b>	\$73,109.60	\$2,683.12
MOBILE HOME (Unanchored)			
<b>TOTAL AMOUNT</b>			\$2,683.12

**ITEM 4: Property Address (if different from mailing address)**

262 Brazil Rd, Hot Springs AR 71913 1st Mtg  
 262 Brazil RD  
 Hot Springs AR 71913

**This is not a Homeowner's Policy.** The Insured Lender's policy provides hazard protection against loss to the referenced property from perils such as fire, lightning, explosion, vandalism, smoke, volcanic eruption, sinkhole, sprinkler leakage and riot; subject to the terms and conditions of the Insured Lender's policy. This coverage may not meet any borrower's insurance needs and the borrower is not an Insured or Additional Insured under the Lender's policy. There is no coverage for contents or additional living expenses. There is no coverage for liability unless indicated above under COVERAGE TYPE. There is no coverage for flood or earthquake and windstorm and hail may be limited. In the event of a total loss, the limits provided above may not be adequate to restore the property.

**Deductible:** In the event of loss, this policy shall be subject to a deductible as defined in the Mortgagee's policy.

**This Notice of Insurance is for information purposes only. It neither amends, extends nor alters the coverage afforded by the Insured Lender's policy which it describes. Consult the Insured Lender's policy for actual terms and conditions.**

IN THE UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF ARKANSAS  
CENTRAL DIVISION

IN RE: MARVIN D. WILLIAMS, JR., Debtor CASE NO. 6:22-bk-70868  
CHAPTER 13

CERTIFICATE OF SERVICE FOR NOTICE OF  
POSTPETITION MORTGAGE FEES, EXPENSES  
AND CHARGES

I, Jacob P. Fair, attorney for Simmons Bank, do hereby certify that I have filed the Notice of Postpetition Mortgage Fees, Expenses and Charges in the CM/ECF electronic filing system, causing notice to be served as provided for therein this 6th day of March 2024.

DATED this 6th day of March 2024.

SIMMONS BANK  
P.O. Box 8010  
Little Rock, Arkansas 72203  
Tel (501) 217-4823  
jacob.fair@simmonsbank.com

By: /s/ Jacob P. Fair  
Jacob P. Fair (2015167)